

## Electronic Patent Application Fee Transmittal

| <b>Application Number:</b>               | 09901610   |                 |               |                             |
|--|--|-----------------|---------------|-----------------------------|
| <b>Filing Date:</b>                      | 11-Jul-2001  |                 |               |                             |
| <b>Title of Invention:</b>               | System, method and recording medium for centralized management of medical images |                 |               |                             |
| First Named Inventor/Applicant Name:     | Takefumi Nagata  |                 |               |                             |
| <b>Filer:</b>                            | Susan Perng Pan/Angela Pomeroy   |                 |               |                             |
| <b>Attorney Docket Number:</b>           | Q65279   |                 |               |                             |
| Filed as Large Entity                    |  |                 |               |                             |
| <b>Utility Filing Fees</b>               |  |                 |               |                             |
| <b>Description</b>                       | <b>Fee Code</b>  | <b>Quantity</b> | <b>Amount</b> | <b>Sub-Total in USD(\$)</b> |
| <b>Basic Filing:</b>                     |  |                 |               |                             |
| <b>Pages:</b>                            |  |                 |               |                             |
| <b>Claims:</b>                           |  |                 |               |                             |
| Claims in excess of 20                   | 1202   | 4               | 50            | 200                         |
| <b>Miscellaneous-Filing:</b>             |  |                 |               |                             |
| <b>Petition:</b>                         |  |                 |               |                             |
| <b>Patent-Appeals-and-Interference:</b>  |  |                 |               |                             |
| <b>Post-Allowance-and-Post-Issuance:</b> |  |                 |               |                             |
| <b>Extension-of-Time:</b>                |  |                 |               |                             |

| Description                        | Fee Code | Quantity | Amount | Sub-Total in USD(\$) |
|------------------------------------|----------|----------|--------|----------------------|
| Extension - 3 months with \$0 paid | 1253     | 1        | 1020   | 1020                 |
| <b>Miscellaneous:</b>              |          |          |        |                      |
| <b>Total in USD (\$)</b>           |          |          |        | <b>1220</b>          |